

IN THE SPECIFICATION

Please amend paragraph [0052] as follows:

[0052] Typically, the methods of the invention are used in evaluating the whether a tumor such as a glioma is likely to respond (i.e. is likely to exhibit growth inhibition) when contacted with an mTOR inhibitor or an EGFR inhibitor. In such embodiments, the presence and/or phosphorylation status of a biomarker polypeptide that is associated with the activation of a pathway (e.g. a phosphorylated S6 ribosomal polypeptide (SEQ ID NO: 1)) is examined to determine if the pathway is dysregulated in that tumor and is therefore susceptible to inhibition by ~~[[a]]~~ an inhibitor known to target that pathway. In such embodiments, the tumor is examined prior to its exposure to the inhibitor. Alternatively, the methods evaluate whether a tumor such as a glioma is responsive (i.e. exhibits growth inhibition) to an mTOR inhibitor or an EGFR inhibitor. In such embodiments, the activity of a biomarker polypeptide that is associated with the activation of a pathway (e.g. a phosphorylated S6 ribosomal polypeptide (SEQ ID NO: 1)) is examined after the tumor is exposed to the inhibitor to determine if the biomarkers in the pathway respond to exposure to the inhibitor.

Please amend paragraph [0074] as follows:

[0074] Embodiments of the invention also include articles of manufacture and/or kits designed to facilitate the methods of the invention. Typically such kits include instructions for using the elements therein according to the methods of the present invention. Such kits can comprise a carrier means being compartmentalized to receive in close confinement one or more container means such as vials, tubes, and the like, each of the container means comprising one of the separate elements to be used in the method. For example, one of the container means can comprise one or more of the antibodies disclosed herein (an anti-S6 antibody for example) that is or can be detectably labeled with a marker. For kits which utilize~~[[s]]~~ immunological methods (e.g. Immunohistochemistry and Western blotting) to detect the target proteins, the kit can also have containers containing buffers for these methods and/or containers comprising antibodies labelled with a reporter-means, such as a chromophore or radioactive molecule. In addition, for kits which utilize additional methodologies such as caspase-3 assays or tunel assays of apoptosis, additional reagents associated with these techniques can be further included in the kits.

Please amend paragraph [0085] as follows:

[0085] Preferred immortalized cell lines are those that fuse efficiently, support stable high level expression of antibody by the selected antibody-producing cells, and are sensitive to a medium such as HAT medium. More preferred immortalized cell lines are murine myeloma lines, which can be obtained, for instance, from the Salk Institute ® Cell Distribution Center, San Diego, California and the American Type Culture Collection, Rockville, Maryland. Human myeloma and mouse-human heteromyeloma cell lines also have been described for the production of human monoclonal antibodies (Kozbor, J. Immunol., 133:3001 (1984); Brodeur et al., Monoclonal Antibody Production Techniques and Applications, Marcel Dekker, Inc., New York, (1987) pp. 51-63).

Please amend paragraph [0087] as follows:

[0087] After the desired hybridoma cells are identified, the clones may be subcloned by limiting dilution procedures and grown by standard methods (Goding, supra). Suitable culture media for this purpose include, for example, Dulbecco's Modified Eagle's Medium and RPMI-1640 medium. Alternatively, the hybridoma cells may be grown in vivo as ascites in a mammal. The monoclonal antibodies secreted by the subclones may be isolated or purified from the culture medium or ascites fluid by conventional immunoglobulin purification procedures such as, for example, protein A-Sepharose ®, hydroxylapatite chromatography, gel electrophoresis, dialysis, or affinity chromatography.

Please amend paragraph [0098] as follows:

[0098] Sections from the tissue microarray were stained with monoclonal antibodies to PTEN (clone 6H2.1, Cascade Bioscience, Winchester MA), EGFR (clone 31G7, Zymed, San Francisco, CA), EGFRvIII (clone L8A4, a generous gift from Dr. Darrell Bigner), and phosphorylation specific antibodies directed against p-Akt (ser 473) p-FKHR (thr24) /p-FKHRL1 (thr32), p-mTOR (ser 2481), p-S6 ribosomal protein (ser 235/236) and p-44/42 MAP kinase (p-Erk) (thr202/tyr204) (Cell Signaling Technology ® ~~Danvers, Technology, Beverly, MA~~). Sections were baked at 60°C and de-paraffinized with xylenes and graded ethanols. Heat-induced antigen retrieval was used as follows: for p-Erk, p-Akt, p-mTOR, p-FKHR/FKHRL1 and p-s6, 0.01 M citrate buffer, pH 6 for 25 minutes in a pressure cooker; for PTEN, 0.01M citrate buffer, pH 6 for 16 minutes in a microwave oven; EGFR, pronase (0.03 g/ml of 0.05 M Tris buffer, pH 7.4) at 37°C for 8 minutes

and for EGFRvIII, 0.01 M citrate buffer, pH 6 for 25 minutes in a vegetable steamer. Endogenous peroxidase activity was quenched with 3% hydrogen peroxide in methanol. Primary antibodies (PTEN at 1:400, EGFR at 1:150, EGFRvIII at 1:400, p-Akt 1:50, p-mTOR 1:50; p-FKHR/FKHRL1 1:50, pS6 1:50 and p-ERK at 1:50) were diluted in Tris buffered saline with 0.1% Tween and applied for 16 hours at 4°C, followed by anti-mouse or anti-rabbit biotinylated immunoglobulins (Vector® Laboratories, Burlingame CA) at 1:100 dilution for one hour, and finally, avidin-biotin complex (Elite® and ABC® reagents from Vector® Laboratories, Burlingame CA) for one hour. Negative control slides received normal mouse serum (DAKO®, Copenhagen, Denmark) as the primary antibody. Diaminobenzidine tetrahydrochloride was used as the enzyme substrate to visualize specific antibody localization for PTEN, EGFR and EGFRvIII; Vector NovaRed (Vector® Laboratories, Burlingame CA) ~~was used~~ for phospho-specific antibodies were used. Slides were counterstained with Harris hematoxylin.

Please amend paragraph [0102] as follows:

[0102] The association between markers was analyzed using Fisher's Exact test. ~~The software was available on the Simple Interactive Statistical Website which can be identified with a internet search using the terms "home.clara.net" (<http://home.clara.net/sisa/index.htm>).~~ For analysis of prognostic factors, we excluded 13 patients who did not receive therapy other than surgery. These patients had a poor performance status at the time of diagnosis and elected not to have further therapy. All other patients had received at least standard involved field fractionated radiation therapy. Kaplan-Meier curves were generated to assess the association of variables with time from initial diagnosis to evidence of progression by imaging or clinical features (time to tumor progression) and time from initial diagnosis to death (overall survival). To identify statistically significant differences in time to progression and overall survival, the Wilcoxon two sample test was used.